Presentation to the Senate Health and Welfare Committee

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January 16, 2015



VHCIP's goal: the "triple aim"

Improved patient experience of care

Improved population health

Reduced per capita costs

What affects health?

How much does health affect costs?



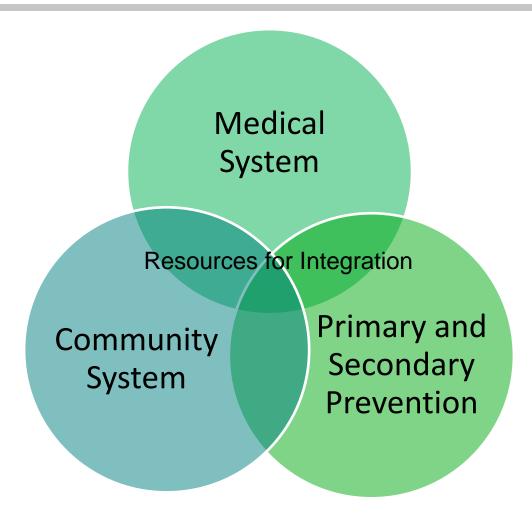
Three Main Goals:

- Care Delivery: enable and reward care integration and coordination;
- HIT/HIE Investments: develop a health information system that supports improved care and measurement of value; and
- Payment Models: align financial incentives with the three aims.

Public/Private Partnership



Inter-related systems





What would constitute success?

A health information technology and health information exchange system that works, that providers use, and that produces analytics to support the best care management possible.

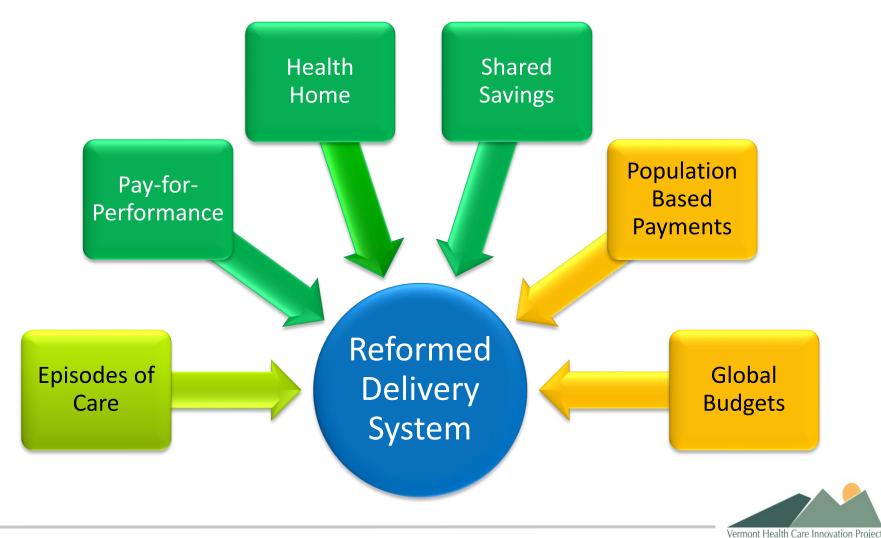
A predominance of payment models that reward better value.

A system of care management that is agreed to by all payers and providers that:

- utilizes Blueprint and Community Health Team infrastructure to the greatest extent possible
- fills gaps the Blueprint or other care models do not address
- eliminates duplication of effort
- creates clear protocols for providers
- reduces confusion and improves the care experience for patients
- follows best practices



Payment Model Development



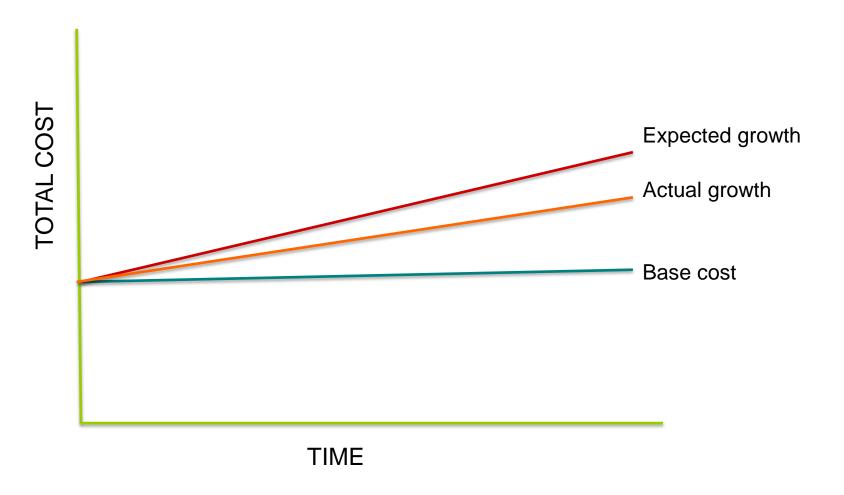
2014 Accomplishments

- Medicaid and commercial Shared Savings ACO Programs Launched
 - Attributing Providers: ~427-500*
 - Beneficiaries: 153,878*
- Blueprint for Health (P4P)
 - Attributing Providers: 638*
 - Beneficiaries: 274,558*
- Episode of Care Planning

^{*}all numbers include Medicare, Medicaid and commercial programs



Savings are dollars not spent



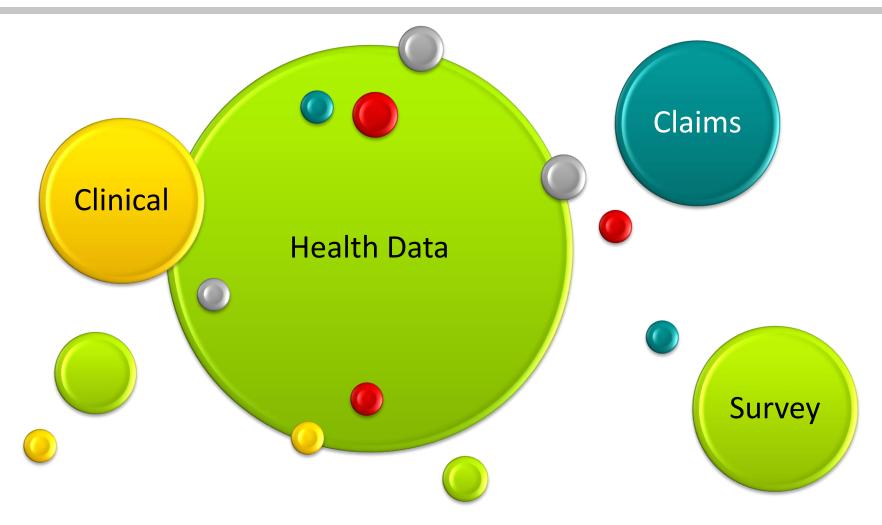


Coming up in 2015

- Year 2 of the Shared Savings Program
- Episode of Care Design
- Blueprint for Health program changes
- Health Home new opportunities
- Population-Based Payment Design
 - ACO providers
 - Non-ACO providers
- Accountable Health Community exploration
 - NVRH, Brattleboro, NMC



HIE/HIT Infrastructure





Progress in 2014

- Electronic Medical Record Installation and Interoperability
 - Providers connected with at least one interface to the VHIE: 177
- Event Notification System: testing
- ACO Gateways: 1 built
- Data Quality Initiatives:
 - Designated Agencies; ACOs; Blueprint
- Uniform Transfer Protocol- supports transitions
- DLTSS Data Analysis-electronic reporting capability
- Providers Impacted by 2014 investments: 399

Vermont Health Care Innovation Project

1/15/2015

Coming up in 2015

- HIT Strategic Plan
- ACO Gateways: Finish build
- Data Warehousing: Begin build
- Data Quality Initiatives Continue
- Uniform Transfer Protocol and DLTSS Data Analysis next steps
- Continue expanding provider connectivity to the VHIE
- Event Notification System: Test and Launch



Delivery System

- Build on the Blueprint for Health foundation
- Integrate care management efforts across payers and providers
- Address gaps in care management/care coordination



Progress in 2014

- Landscape analysis
- Learning Collaboratives soft-launch:
 - Providers: 58
 - Vermonters: TBD
- Sub-Grant Program: Delivery System Focus
 - Providers: 692
 - Vermonters: 281,808
- ACO/Blueprint Alignment begins



Coming up in 2015

Learning Collaboratives:

Providers: 92

– Vermonters: TBD

- Sub-Grant Program: Delivery System Focus
- Further alignment towards unified or aligned system of care management



Questions?

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